

1 David A. St. John (048746)
ST. JOHN LAW OFFICES
2 309 SOUTH A Street
Oxnard CA 93030-5804
3 (805) 486-8000 - (805) 512-7318 fax
dsj@law-pro.net
4

5 *Attorneys for SYLVIA JIMENEZ*
6
7

8 **UNITED STATES BANKRUPTCY COURT**
9 **SOUTHERN DISTRICT OF CALIFORNIA**
10

11 In re:

12 Sylvia Jimenez,

13 Debtor.
14

Case No. 10-18065-MM11

**EX-PARTE APPLICATION FOR ORDER
SETTING CLAIMS BAR DATE**

[Fed. R. Bankr. P. 3003(c)(3), and
LBR 9013-6]

Hearing: None Required

16
17 I, David A. St. John, am the attorney for Debtor in the above-entitled action and hereby
18 declare as follows:

19 1. Debtor must be able to accurately determine the amount and classification of
20 claims in this case. Debtor will be filing her Disclosure Statement and Plan with this Court
21 shortly.

22 2. Therefore, it is requested that this Court set a claims bar date in this matter. Debtor
23 requests that the claims bar date be set for **March 10, 2011**.

24 3. Debtor attaches a proposed Notice of Claims Bar Date as Exhibit "A" hereto. Creditors
25 will be given not less than twenty-eight (28) days notice of the last date to file proofs of claim.

26 4. Pursuant to Local Rule 9013-6(a)(1) no notice is required for this ex-parte application.

27 5. This ex-parte application and proposed order were served on the Office of the United
28 States Trustee on January 25, 2011.

1 I declare under penalty of perjury, pursuant to the laws of the United States of America,
2 that the foregoing is true and correct.

3 Executed this 25nd day of January, 2011, at Oxnard, California.

4
5 ST. JOHN LAW OFFICES

6
7 /s/ David A. St. John

8 DAVID A. ST. JOHN
9 Counsel for Debtor and
10 Debtor-in-Possession
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

1 David A. St. John (048746)
ST. JOHN LAW OFFICES
2 309 SOUTH A Street
Oxnard CA 93030-5804
3 (805) 486-8000 - (805) 512-7318 fax
dsj@law-pro.net
4

5 *Attorneys for SYLVIA JIMENEZ*

6
7
8 **UNITED STATES BANKRUPTCY COURT**
9 **SOUTHERN DISTRICT OF CALIFORNIA**
10

11 In re:

12 Sylvia Jimenez,

13 Debtor.
14

Case No. 10-18065-MM11

NOTICE OF CLAIMS BAR DATE

15 **TO THE CREDITORS OF THE ESTAE OF SYLVIA JIMENEZ**

16 **YOU ARE HEREBY NOTIFIED** that that the claims bar date for filing proofs of claim
17 in this proceeding pursuant to Federal Rules of Bankruptcy Procedure ("FRCB"), Rule 3003,
18 shall be **March 10, 2011**. The proofs of claims shall be filed with the United States Bankruptcy
19 Court, 325 West F Street, San Diego, California 92101. FRBP 3001(c) provides that when "a
20 claim is based on a writing" the "original or a duplicate shall be filed with the proof of claim."

21 Such claims should include copies of all applicable written evidence of enforceable
22 agreement or a contract that establishes the debt between the debtor and creditor, a written
23 statement of the account, a list of interest and other charges along with payments made,
24 documentation and proof of fees, advances, late fees, over limit fees, finance charges, attorney
25 fees, interest, NSF check fees, phone payment fees, the interest rates used to compute the balance
26 alleged on the Proof of Claim, an explanation and breakdown of the elements used in each of the
27 calculations, and a copy of the agreement authorizing the interest, charges and fees that are
28 included in the claim.

Attached hereto is a copy of Official Form B10 PROOF OF CLAIM for your use. Line 7 sets forth what type of supporting documents will act as evidence of the validity of the claim:

“7. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.”

If you are uncertain about your claim, you may want to consult with an attorney. It is the sole responsibility of each claimant to correctly fill out the proof of claim and to satisfy the mandatory requirements of FRBP 3001(c).

Who Must File. Any creditor or equity security holder or whose claim or interest is not scheduled or scheduled as disputed, contingent, or unliquidated shall file proof of claim or interest on or before January 5, 2011.

Who May File. Any creditor or indenture trustee may file a proof of claim on or before **March 10, 2011.**

The schedule of liabilities filed by the Debtor pursuant to 11 U.S.C. § 521(1) shall constitute prima facie evidence of the validity and amount of the claims of creditors, unless they are scheduled as disputed, contingent, or unliquidated. It shall not be necessary for a creditor or equity security holder to file a proof of claim or interest unless that creditor's claim or interest is not scheduled, or is scheduled as disputed, contingent, or unliquidated.

The list of equity security holders filed pursuant to FRBP 1007(a)(3) shall constitute prima facie evidence of the validity and amount of the equity security interest and it shall not be necessary for the holders of such interest to file a proof of interest.

Dated: January 25, 2011

ST. JOHN LAW OFFICES

/s/ David A. St. John

DAVID A. ST. JOHN

Counsel for Debtor and
Debtor-in-Possession

ST. JOHN LAW OFFICES
300 SOUTH ASH STREET
OXFORD, CT 06455-3084
TEL 803-488-8000

B10 (Official Form 10) (4/10)

United States Bankruptcy Court - Southern District of California		PROOF OF CLAIM
Name of Debtor: Sylvia Jimenez		Case Number: 10-18065-MM11
<i>NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.</i>		
Name of Creditor (The person or other entity to whom the debtor owes money or property): -		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ <i>(If known)</i> Filed on: _____
Name and address where notices should be sent:		
Telephone number:		
Name and address where payment should be sent (if different from above):		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check this box if you are the debtor or trustee in this case.
Telephone number:		
1. Amount of Claim as of Date Case Filed: \$ _____ If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4. If all or part of your claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.		5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount. Specify the priority of the claim. <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B) <input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5). <input type="checkbox"/> Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(____). Amount entitled to priority: \$ _____ <small>* Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.</small>
2. Basis for Claim: _____ (See instruction #2 on reverse side.)		
3. Last four digits of any number by which creditor identifies debtor: _____ 3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)		
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: Value of Property: \$ _____ Annual Interest Rate: _____ Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____		
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.		
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements or running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain:		
Date:	Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.	
FOR COURT USE ONLY		

B 10 (Official Form 10) (04/10) -- Cont.

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

Items to be completed in Proof of Claim form**Court, Name of Debtor, and Case Number:**

Fill in the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the bankruptcy debtor's name, and the bankruptcy case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is located at the top of the notice.

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the Bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if the trustee or another party in interest files an objection to your claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Use this space to report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

4. Secured Claim:

Check the appropriate box and provide the requested information if the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See DEFINITIONS, below.) State the type and the value of property that secures the claim, attach copies of lien documentation, and state annual interest rate and the amount past due on the claim as of the date of the bankruptcy filing.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a).

If any portion of your claim falls in one or more of the listed categories, check the appropriate box(es) and state the amount entitled to priority. (See DEFINITIONS, below.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

7. Documents:

Attach to this proof of claim form redacted copies documenting the existence of the debt and of any lien securing the debt. You may also attach a summary. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary. FRBP 3001(c) and (d). If the claim is based on the delivery of health care goods or services, see instruction 2. Do not send original documents, as attachments may be destroyed after scanning.

Date and Signature:

The person filing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2), authorizes courts to establish local rules specifying what constitutes a signature. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

DEFINITIONS**Debtor**

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

Creditor

A creditor is a person, corporation, or other entity owed a debt by the debtor that arose on or before the date of the bankruptcy filing. See 11 U.S.C. §101 (10).

Claim

A claim is the creditor's right to receive payment on a debt owed by the debtor that arose on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.

Proof of Claim

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the clerk of the same bankruptcy court in which the bankruptcy case was filed.

Secured Claim Under 11 U.S.C. §506(a)

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car.

A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien. A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

Unsecured Claim

An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.

Claim Entitled to Priority Under 11 U.S.C. §507(a)

Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

Redacted

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor should redact and use only the last four digits of any social-security, individual's tax-identification, or financial-account number, all but the initials of a minor's name and only the year of any person's date of birth.

Evidence of Perfection

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.

INFORMATION**Acknowledgment of Filing of Claim**

To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim or you may access the court's PACER system (www.pacer.psc.uscourts.gov) for a small fee to view your filed proof of claim.

Offers to Purchase a Claim

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 *et seq.*), and any applicable orders of the bankruptcy court.

CSD 1001A [11/15/04]

Name, Address, Telephone No. & I.D. No.

David A. St. John

ST JOHN LAW OFFICES

309 South A Street

Oxnard CA 93030-5804

(805) 486-8000

048746

UNITED STATES BANKRUPTCY COURT

SOUTHERN DISTRICT OF CALIFORNIA

325 West "F" Street, San Diego, California 92101-6991

In Re

SYLVIA JIMENEZ,

Debtor.

BANKRUPTCY NO. 10-00173-11MM

Date of Hearing:

Time of Hearing:

Name of Judge: Margaret M. Mann

ORDER SETTING CLAIMS BAR DATE

IT IS ORDERED THAT the relief sought as set forth on the continuation pages attached and numbered two (2) through two (2) with exhibits, if any, for a total of two (2) pages, is granted. Motion/Application Docket Entry No. _____

//

//

//

//

//

//

DATED:

Judge, United States Bankruptcy Court

Signature by the attorney constitutes a certification under Fed. R. of Bankr. P. 9011 that the relief in the order is the relief granted by the court.

Submitted by:

ST JOHN LAW OFFICES

(Firm name)

By: /s/ David A. St. John

Attorney for Debtor

CSD 1001A

CSD 1001A [11/15/04] (Page 2)
ORDER SETTING CLAIMS BAR DATE
DEBTOR: SYLVIA JIMENEZ

CASE NO:10-18065-11MM

This matter came on for review before the above-entitled Court, Department One thereof, the Honorable Margaret M. Mann, Judge Presiding, upon the Application of the Debtor, Sylvia Jimenez, for Order Setting Claims Bar Date.

Upon review of the Application and good cause appearing;

IT IS HEREBY ORDERED that the Claims Bar Date for filing Proofs of Claim for Pre-Petition Claims and Administrative Expenses in this Case shall be March 10, 2011, at 4:00 p.m., local time, provided that creditors shall be given not less than twenty-eight (28) days notice of the last date to file proofs of claim. The form of "Notice of Claims Bar Date" filed with the Application is hereby approved. All claims shall be filed with the U.S. Bankruptcy Court located at 325 West "F" Street, San Diego, California 92101. The failure of any party to file their claim by March 10, 2011, at 4:00 p.m., local time, if required, shall result in their claim being forever barred in this proceeding.

CSD 3010 [04/28/96]

Name, Address, Telephone No. & I.D. No.

David A. St. John

ST JOHN LAW OFFICES

309 South A Street

Oxnard CA 93030-5804

(805) 486-8000

048746

UNITED STATES BANKRUPTCY COURT

SOUTHERN DISTRICT OF CALIFORNIA

325 West "F" Street, San Diego, California 92101-6991

In Re

SYLVIA JIMENEZ,

Debtor.

BANKRUPTCY NO. 10-18065-11MM

Plaintiff(s)

ADVERSARY NO. n/a

v.

Defendants(s)

PROOF OF SERVICE

I, David A. St. John, certify that I am, and at all times during the service of process was, not less than 18 years of age and not a party to the matter concerning which service of process was made. I further certify that I served a copy of the following documents [describe each document served]: EX PARTE APPLICATION FOR ORDER SETTING CLAIMS BAR DATE, NOTICE OF CLAIMS BAR DATE, [Proposed] ORDER SETTING CLAIMS BAR DATE, on January 25, 2011 by:

☒ By E-MAIL to: ustp.region15sop@usdoj.gov (Office of the United States Trustee)

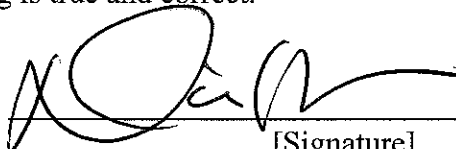
☐ Personal Service - By leaving the documents with the following named person(s) or an officer or agent of the person(s) at:

☐ Residence Service - By leaving the documents with the following adult at:

Under penalty of perjury, I declare that the foregoing is true and correct.

January 25, 2011

[Date]


[Signature]

Print Name	David A. St. John
Business Address	309 South A Street
City, State, ZIP	Oxnard CA 93030-5804